PART B - FEE(S) TRANSMITTAL

· Complete and send this form, together with applicable fee(s), to: Mail Stop ISSOE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

appropriate. All further	correspondence including the delay of the de	ng the Patent, advance or	rders and notification of r	naintenance fees v	vill be mailed to the curr	5 should be completed where ent correspondence address as separate "FEE ADDRESS" for	
Feels					is certificate cannot be use	I for domestic mailings of the ed for any other accompanying ament or formal drawing, must in.	
901 NEW YORK	IENDERSON, FA	ARABOW, FERR	ETT & DUNNER State	Cer reby certify that th es Postal Service y	tificate of Mailing or Trais is Fee(s) Transmittal is be		
WASHINGTON	, DC 20001-4413	03.20	<i>™</i> 🖺 🗀			(Depositor's name)	
		MAY				(Signature)	
		SHENTS TRADE				(Date)	
APPLICATION NO.	FILING DATE	W I MAL	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	CONFIRMATION NO.	
10/518,716	08/01/2005		Catherine Lynn Dwyer	er 02814.0069-00000 4834			
FITLE OF INVENTION	: PHOSPHOROUS COI	NTAINING LIGANDS FO	OR METATHESIS CATA	LYSTS			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TOTAL FEE(S) D	UE DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0 \$1700 05/07/2007			
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS	05/04/2007 MAMIED2 20002032 10518716			
NAZARIO GONZALEZ, PORFIRIO 1621			556-022000	01 FC:1501 1400.00 OP 320.00 OP			
 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto	the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a istered attorney or agent) and the names of up to egistered patent attorneys or agents. If no name is ed, no name will be printed.			
B. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Sasol Technology (UK) Limited Scotland, United Kingdom							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
Aa. The following fee(s) are submitted: State Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies -5 (\$15.00)			Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-0916 (enclose an extra copy of this form).				
•	us (from status indicates SMALL ENTITY state	,	☐ b. Applicant is no lone	ger claiming SMAI	LL ENTITY status. See 37	CFR 1 27(g)(2)	
NOTE: The Issue Fee and	Publication Fee (if req		from anyone other than t			r the assignee or other party in	
Authorized Signature	(Miller >	Mull	omee.	Date	Ey 2, 200	7	
Typed or printed name Arthur S. Garrett			Registration No. 20, 338				
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete							

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.